

PETITION TO AMEND ZONING ORDINANCE

TO: JEFFERSON COUNTY CLERK
JEFFERSON COUNTY BOARD OF SUPERVISORS

This petition, made under and pursuant to provisions of s59.97(5)(e)1, Wisconsin Statutes, requests the Jefferson County Board of Supervisors to amend the Zoning Ordinance of Jefferson County.

REQUEST THAT THE ZONING MAP OF THE TOWN OF _____
(Petitioner's Name-Please Print)
be amended to change the zoning classification of the property described
from _____ district to _____.

PROPERTY DESCRIPTION

____ 1/4 ____ 1/4 Section _____, Town _____ N, Range _____ E, Town of _____
Property
Address _____ Lot ____ Block ____ Parcel No. _____
Subdivision _____ CSM _____ Vol. _____ Page _____
Parent Parcel Size _____ Present Use _____
Assessed Value of Improvements Involved to be Rezoned _____

PROPERTY OWNER(S)

Name _____	Name _____
Address _____	Address _____
_____	_____
Phone _____	Phone _____

PLEASE EXPLAIN PETITION:

Submit Preliminary Certified Survey Delineating Proposed Land Division. Reasons for Rezoning, Type of Use Proposed and Structures Needed, Land Modifications Necessary, etc. USE ADDITIONAL PAGES, IF NEEDED. ALL PAGES INCLUDING PLOT PLAN TO BE NO LARGER THAN 11 X 17. ***Failure to submit a completed application that includes the above-mentioned items could delay presentation of the petition at the next public hearing. Soils Report by Certified Soil Tester and a Final Certified Survey Map May Be Required Following Approval. Keep a copy of the application and attachments to give to the Town.***

PETITIONERS/OWNERS UNDERSTAND THAT NOTICE OF PUBLIC HEARING WILL BE SENT TO THEM, TO TOWNSHIP OFFICIALS, COUNTY BOARD SUPERVISOR FOR THE AREA OF REZONING, AND PROPERTY OWNERS WITHIN ONE-QUARTER MILE OF PARCEL IN QUESTION.

AS PETITIONER/OWNER, I UNDERSTAND THAT I MUST CONTACT TOWNSHIP OFFICIALS AND ATTEND A TOWN BOARD MEETING ON THIS MATTER PRIOR TO THE COUNTY'S PUBLIC HEARING; I UNDERSTAND THAT I MUST ALSO ATTEND THE COUNTY'S PUBLIC HEARING OR SEND AN AGENT TO REPRESENT ME.

(Signature of OWNER) (Date)

(Address, if Different From Above)

(Signature of PETITIONER) (Date)

(Address, if Different From Above)

Extraterritorial _____

County Board Supervisor _____

Decision Sheet Sent to Town on _____